## **FORM D**

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# **FORM D**



NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** 

143	8705
OMB AF	PROVAL
OMB Number	3235-0076

Expires: June 30,2008 Estimated average burden hours per response. . . . . 16.00

SEC U	SE ONLY
Prefix	Serial
DATE P	RECEIVED
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UNIFORM LIMITED OFFERING EXEM	_
Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	Mell SEC
CARBONFLOW, INC.  Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	Mail Processing
Filing Under (Check box(cs) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	·
	JUN 24 2008
A. BASIC IDENTIFICATION DATA	-11 6000
1. Enter the information requested about the issuer	Weshington, DC
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	പ്യപ്പ
CARBONFLOW, INC.	0 U U
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
505 Montgomery Street, 2nd Floor, San Francisco, CA 94111	415-277-0171
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	L.,
Time of Dusiness (Association	PROCESSED.
Type of Business Organization  Corporation  Ilmited partnership, already formed  other ()	
business trust limited partnership, to be formed	JUN 2 6 2008
Month Year  Actual or Estimated Date of Incorporation or Organization:   Month Year  Actual or Estimated Date of Incorporation or Organization:   Month Year  Actual or Estimated Date of Incorporation or Organization:   Month Year  Actual or Estimated Date of Incorporation or Organization:   Month Year  Actual or Estimated Date of Incorporation or Organization:   Month Year  Actual or Estimated Date of Incorporation or Organization:   Month Year  Actual or Estimated Date of Incorporation or Organization:   Month Year  Actual or Estimated Date of Incorporation or Organization:   Month Year  Actual or Estimated Date of Incorporation or Organization:   Month Year  Actual or Estimated Date of Incorporation or Organization:   Month Year  Actual or Estimated Date of Incorporation or Organization:   Month Year  Actual or Estimated Date of Incorporation or Organization:   Month Year  Actual or Estimated Date of Incorporation or Organization:   Month Year  CN for Canada; FN for other foreign jurisdiction)	THOMSON REUTERS
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D 77d(6).	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given which it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20	0549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manual photocopies of the manually signed copy or bear typed or printed signatures.	ly signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only report thereto, the information requested in Part C, and any material changes from the information previously support be filed with the SEC.	
Filing Fee: There is no federal filing fee.	•
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for subJose and that have adopted this form. Issuers relying on ULOE must file a separate notice with the are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for accompany this form. This notice shall be filed in the appropriate states in accordance with state law, this notice and must be completed.	Securities Administrator in each state where sales or the exemption, a fee in the proper amount shall
ATTENTION —	
Failure to file notice in the appropriate states will not result in a loss of the federal e appropriate federal notice will not result in a loss of an available state exemption unit filing of a federal notice.	

ļ					A. BASIC IDE	ENTII	FICATION DATA				
2.	Enter the informatio	n request	ed for the fo	llowin	g:	-			•		
•	<ul> <li>Each promoter</li> </ul>	of the iss	uer, if the is	suer h	as been organized w	ithin t	the past five years;				
	<ul> <li>Each beneficial</li> </ul>	owner ha	aving the pov	ver to v	ote or dispose, or dir	ect th	c vote or disposition	of, 10	% or more o	f a clas	s of equity securities of the issuer.
	<ul> <li>Each executive</li> </ul>	officer a	nd director o	of corp	orate issuers and of	согро	rate general and man	naging	partners of	f partne	rship issuers; and
,	<ul> <li>Each general as</li> </ul>	nd manag	ing partner o	of part	nership issuers.	•	_		•	·	·
					· · · · · · · · · · · · · · · · · · ·						~
Checl	k Box(es) that Apply	/: L	Promoter	M	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
	Name (Last name fir Dikeman	st, if indi	vidual)								
	ness or Residence Ad Montgomery Stree				t, Citv. State, Zip Co 1111	ode)		•			
Check	k Box(es) that Apply	r: 🔲	Promoter	Ø	Beneficial Owner	Ø	Executive Officer	Ø	Director		General and/or Managing Partner
	Name (Last name fir a Bell	st, if indi	vidual)				<del></del>		<u> </u>		
	ness or Residence Action to the Action to th				t, City, State, Zip Co 111	ode)					
Check	k Box(cs) that Apply	y: 📋	Promoter	2	Beneficial Owner		Executive Officer	Ø	Director		General and/or Managing Partner
	Name (Last name fir y Langeler	st. if indi	vidual)								
	ness or Residence Ad Market Street, Ki			Street	t, City, State, Zip Co	ode)		-		•	
Cheel	k Box(cs) that Apply	/: 📋	Promoter	Z	Beneficial Owner		Executive Officer	Z	Director		General and/or Managing Partner
	Name (Last name fir Schickedanz	st, if indi	vidual)								
	ness or Residence Ad California Street,				t, City, State, Zip Co 1	ode)		-	a. <u>-</u> .	-	
Checi	k Box(cs) that Apply	y: 🔲	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
	Name (Last name fir Capital Partners		vidual)		·					-	
	ness or Residence Ac Montgomery Stree				t, City, State, Zip Co 1111	ode)			<del></del>		
Chec	k Box(cs) that Apply	r: 🔲	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full N	Name (Last name fir	st, if indi	vidual) -					···			
Busin	ness or Residence Ac	ldr <b>e</b> ss (	Number and	Street	t. City. State. Zin Co	nde)					
Check	k Box(es) that Apply	y: 🗌	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full N	Name (Last name fin	st, if indi	ividual)								
Busin	ness or Residence Ac	idress (	Number and	Stree	t, City, State, Zip Co	ode)					

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

					B. II	NFORMAT	ION ABOU	T OFFERI	NG				
1.	Has the	issuer sold	d, or does th	ne issuer ü	ntend to se	ll to non-a	ccredited i	nvestors ir	this offer	ing?		Yes	No <b>x</b>
••	Tius the	issuer son	a, or does t			Appendix						_	
2.	What is	the minim	um investn			• •		_				\$ 10,5	500.00
						•						Yes	No
3.			permit join										<b>[2</b> ]
4.	commis If a pers or states a broke	sion or sim on to be lis s, list the na r or dealer	illar remune sted is an ass ame of the b , you may s	ration for s sociated pe roker or do et forth the	solicitation erson or age ealer. If mo	of purchasent of a broker ore than five	ers in conn (er or deale e (5) persoi	ection with r registered ns to be list	sales of sec d with the S ed are asso	curities in t SEC and/or	irectly, any he offering. with a state sons of such		
Ful N/A		Last name	first. if indi	ividual)									
Bus	siness or	Residence	Address (N	umber and	d Street, C	ity, State, Z	Cip Code)		.,			··	
Nar	ne of As	sociated B	roker or De	aler									
Stat	tes in Wi	ich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers			<u>.</u>			······································
	(Check	"All State:	s" or check	individual	States)					**************	***************************************	∏ Al	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	MA ND WA	MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	l Name (	Last name	first, if ind	ividual)						<u>-</u>			
Bus	siness or	Residence	Address (1	Number an	d Street. C	City, State.	Zin Code)						
Nar	ne of As	sociated Bi	roker or De	aler									· · · · · · · · · · · · · · · · · · ·
Stat	tes in Wi	ich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individual	States)	***************************************				***************************************		☐ Al	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	l Name (	Last name	first. if indi	ividual)					• • •				
Bus	iness or	Residence	Address (1	Number an	d Street, C	ity, State,	Zip Code)						
Nar	ne of As	sociated B	roker or De	aler									
Stat	tes in Wh	nich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers			<del></del>	<u> </u>	<del></del>	
	(Check	"All State:	s" or check	individual	States)						***************************************	☐ Al	I States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \subseteq \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
		t	¢
	Debt		\$ 2,899,999.20
	Equity	<b></b>	2
	☐ Common ☑ Preferred	•	•
	Convertible Securities (including warrants)		\$
	Partnership Interests	>	3
	Other (Specify	2,899,999.20	\$
		<u> </u>	\$
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	-	\$ 2,899,999.20
	Non-accredited Investors		s <sup>0</sup>
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		<del></del>
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security Preferred	Sold
	Rule 303		\$ 2,899,999.20
	Regulation A		<b>s</b>
	Rule 504		\$
	Total	<del></del>	<b>\$_</b>
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		<b>s</b>
	Printing and Engraving Costs		\$
	Legal Fees	🔽	\$ 25,000.00
	Accounting Fees	_	\$
	Engineering Fees	_	\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)	П	\$
	Total		\$ 25,000.00

	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		2,874,999.20 \$
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.		
	Salaries and fees	Payments to Officers, Directors, & Affiliates	Payments to Others  300,000
	Purchase of real estate		
	Purchase, rental or leasing and installation of machinery and equipment		\$_
	Construction or leasing of plant buildings and facilities		. [] \$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	¬\$	<b></b>
	Repayment of indebtedness	_ 	
	Working capital		
	·		
		\$	. 🗆 \$
	Column Totals		
	Total Payments Listed (column totals added)	<b>≥</b> \$	00,000
	D. FEDERAL SIGNATURE	<del> </del>	······
sig the Iss	e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commist information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Fuer (Print or Type)  Signature	sion, upon writte	en request of its staff,
Na	me of Signer (Print or Type)  Avich Niebaver  Assistant Secretary		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE			
	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No	

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)  Carbon Flow, Inc.	Signature   Date 6-19-08
Name (Print or Type)  DAVID Nichaver	Title (Print or Type)   Assistant Secretary

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

### **APPENDIX** 2 3 4 5 Disqualification under State ULOE Type of security and aggregate (if yes, attach Intend to sell offering price Type of investor and explanation of to non-accredited amount purchased in State waiver granted) offered in state investors in State (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited Yes Investors Investors Yes No State No Amount **Amount** ALΑK ΑZ AR 900,001 0 CA X X CO CT DE DC FL GA HI ID IL IN IA KS KY LA ME MD MA ΜI MN MS

#### **APPENDIX** 5 .3 4 2 1 Disqualification under State ULOE Type of security and aggregate Intend to sell (if yes, attach Type of investor and explanation of to non-accredited offering price waiver granted) offered in state amount purchased in State investors in State (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) Number of Number of Non-Accredited Accredited **Investors** Yes No State Yes No **Amount Investors Amount** MO MT NE NV NH NJ NM NY NC ND OH OK OR PA RI SC SD TN 1 0 99,999 0 TXX UT VT VA 1499999 2 0 0 X WA X wv WI

	APPENDIX													
1		2	3		4									
	to non-a	I to sell accredited is in State a-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)					Type of investor and expanding purchased in State wa			under State ULO (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No					
WY														
PR														

